

Community Pathways – Current

Service Type: Statutory Service

Service (Name): Residential Habilitation

Alternative Service Title: **COMMUNITY RESIDENTIAL HABILITATION**

HCBS Taxonomy:

Check as applicable

☐ Service is included in approved waiver. There is no change in service specifications.

☒ Service is included in approved waiver. The service specifications have been modified.

☐ Service is not included in the approved waiver.

Service Definition:

- A. Community residential habilitation services assist participants in acquiring the skills necessary to maximize the participant's independence in activities of daily living and to fully participate in community life. Services shall increase individual independence and reduce level of service need.
- B. Residential habilitation services are provided services in the following DDA licensed community settings:
 - 1. Group homes; or
 - 2. Alternative living units.
- C. Residential habilitation services shall be provided as required in the IP and shall include the following:
 - 1. A program of habilitation which shall:
 - a. Be specified in the IP; and
 - b. Provide training in the development of self-help, daily living, self-advocacy, and survival skills based on needs, ability, and whether the skills are likely to improve the individual's quality of life;
 - 2. Mobility training to maximize use of public transportation in traveling to and from community activities and services, and recreational sites;
 - 3. Training and assistance in developing appropriate social behaviors that are normative in the surrounding community such as conducting one's self appropriately in restaurants, on public transportation vehicles, in recreational facilities, in stores, and in other public places;
 - 4. Training and assistance in developing patterns of living, activities, and routines which are appropriate to the waiver participant's age and the practices of the surrounding community and which are consistent with the waiver participant's interest and capabilities as appropriate;
 - 5. Training and assistance in developing basic safety skills;
 - 6. Training and assistance in developing competency in housekeeping skills including, but not limited to, meal preparation, laundry, and shopping;
 - 7. Training and assistance in developing competency in personal care skills such as bathing, toileting, dressing, and grooming;

8. Training and assistance in developing health care skills, including but not limited to,
 - a. Maintaining proper dental hygiene;
 - b. Carrying out the recommendations of the dentist or physician;
 - c. Appropriate use of medications and application of basic first aid;
 - d. Arranging medical and dental appointments; and
 - e. Summoning emergency assistance;
9. Training and assistance in developing money management skills, which include recognition of currency, making change, bill paying, check writing, record keeping, budgeting, and saving; and
10. Supervision or guidance of individuals as appropriate.
- D. Residential habilitation services may include other services unavailable from any other resource, including the Medicaid State Plan, when approved and funded by the DDA.
- E. Coordination, monitoring, follow-up, and transportation to and from appointments for medical services as appropriate.
- F. Occupational therapy services, provided by or under the direction of a licensed occupational therapist for rehabilitation and habilitation for adults, shall be provided when included in the IP and shall include:
 1. Specifications of the treatment to be rendered, the frequency and duration of that treatment, and the expected results;
 2. Evaluation and reevaluation of the waiver participant's level of functioning through the use of standardized or professionally accepted diagnostic methods;
 3. Development and delivery of appropriate treatment programs which are designed to significantly improve a waiver participant's level of functioning within a reasonable period of time;
 4. Selection and teaching of task-oriented therapeutic activities designed to restore physical functioning; and
 5. Improvement of mobility skills.
- G. Physical therapy services, provided by or under the direction of a licensed physical therapist for the purpose of habilitation for adults, shall be provided when included in the IP and shall specify:
 1. Part or parts of the body to be treated;
 2. Type of modalities or treatments to be rendered;
 3. Expected results of physical therapy treatments; and
 4. Frequency and duration of treatment which shall adhere to accepted standards of practice.
- H. Social services, not provided under the Program, shall be provided when included in the IP and shall include:
 1. Identification of the waiver participant's social needs; and
 2. Supports to assist the waiver participant's adaptation and adjustment to his or her environment.
- I. Speech pathology and audiology services, provided by or under the direction of a licensed speech language therapist or licensed audiologist for rehabilitation and habilitation for adults, shall be provided when included in the IP and shall include:
 1. Maximization of communication skills;
 2. Screening, evaluation, counseling, treatment, habilitation, or rehabilitation of waiver participants with hearing, language, or speech handicaps;
 3. Coordination of interdisciplinary goals related to hearing and speech needs; and

4. Consultation with staff regarding the waiver participant's programs.
- J. Medically necessary nursing services provided by a licensed registered nurse or licensed practical nurse shall be provided when preauthorized by the DDA and included in the IP and includes:
 1. Short-term skilled, non-delegated nursing tasks, unavailable under the State Plan home health benefit, as performed by the nurse to allow individuals to return to the community or stay in the community following a serious illness or hospitalization;
 2. Part-time or intermittent skilled, non-delegated nursing tasks, unavailable under the State Plan home health benefit, as performed by the nurse for individuals who need brief nursing intervention;
 3. Nursing supervision consistent with the Maryland Nurse Practice Act and COMAR 10.27.11 which may include:
 - a. Meeting with provider's staff to discuss how the medical services that are identified in the IP will be implemented; and
 - b. Education, supervision, and training of waiver participants in health-related matters.
- K. Community Exploration is an opportunity for the individual to experience short-term overnight stays with a community provider and for the provider to learn about and form a relationship with the individual prior to the transition.
- L. Transportation assistance to and from activities shall be provided by the provider that achieves the least costly, most integrated, and most appropriate means of transportation for the individual, with the priority given to the use of public transportation or natural supports. Individuals shall be encouraged to utilize public transportation and transportation supplied by family, friends, neighbors or volunteers, as appropriate to the individual's needs and abilities.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

- A. Community residential habilitation services shall be provided for at least 6 hours a day to a participant or when the participant spends the night in the residential home.
- B. Service is not available under self direction model of this waiver.
- C. Community Exploration for people transitioning from an institutional or non residential site must be preauthorized by the DDA and may be provided for a maximum of seven (7) days and/or overnight stays within the 180 day period in advance of their move.
- D. Transportation between the participant's place of residence and other service sites and places in the community is provided as a component of residential habilitation services and the cost of this transportation is included in the rate paid to providers of residential habilitation services.
- E. Any other professional services will only be covered under the waiver if the Program has denied a covered service and the service has been preauthorized by the DDA.
- F. Residential habilitation services may include the provision of medical and health care services that are integral to meeting the daily needs of residents (e.g., routine administration of medications by nurses or tending to the needs of residents who are ill or require attention to their medical needs on an ongoing basis). The provision of such routine health services and the inclusion of the payment for such services in the payment for residential habilitation services are not considered to violate the requirement that a waiver may not cover services that are available through the State plan. Medical and health care services such as physician

services that are not routinely provided to meet the daily needs of residents may not be included.

- G. To be approved, add on and supplemental services must be the most "cost effective," which is the service that is available from any source, is least costly to the State, and reasonably meets the identified need.
- H. The Medicaid payment for community residential habilitation may not include either of the following items which the provider is expected to collect from the participant:
 - 1. Room and board; or
 - 2. Any assessed amount of contribution by the individual for the cost of care, established according to Regulation .04E of this chapter.
- I. Residential Retainer Fees is available for 33 days per year per recipient when the recipient is unable to be in residential habilitation due to hospitalization, behavioral respite, family visits, etc.
- J. Payment is not to be made for the cost of room and board, including the cost of building maintenance, upkeep and improvement. The method by which the costs of room and board are excluded from payment for residential habilitation is specified in Appendix I-5.
- K. Payment for services is based on compliance with billing protocols and a completed service report.
- L. Timesheets and other supporting documentation are required as proof of delivery of services as required by the DDA.
- M. Payment rates for services must be reasonable, customary, and necessary as established by the program.

Service Delivery Method (check each that applies)

☐ Participant Directed as specified in Appendix E
☒ Provider Managed

Specify whether the service may be provided by (check all that applies):

☐ Legally Responsible Person
☐ Relative
☐ Legal Guardian

Provider Specifications: (Instructions list the following for each type of provider that can deliver the services):

Provider Category	Provider Type Title
Agency	DDA Certified Organized Health Care Delivery System (OHCDS) Provider as per COMAR 10.22.20
Agency	Licensed Community Residential Services - Alternative Living Unit
Agency	Licensed Community Residential Services - Group Home

Provider Category: Agency

Provider Type: DDA Certified Organized Health Care Delivery System (OHCDS) Provider as per COMAR 10.22.20

Provider Qualifications License (specify):

License Residential Services provider as per COMAR 10.22.02 and 10.22.08 for either Alternative Living Units or Group Homes

Certificate (specify):

DDA certified Organized Health Care Delivery System Provider as per COMAR 10.22.20

Other Standard (specify):

Staff must possess appropriate licenses/certifications as required by law based on needs of the person at time of service.

Nurses completing the Health Risk Screening Tool (HRST) must complete all required HRST training and be certified.

Verification of Provider Qualifications

Entity Responsible for Verification:

- OHCQ for license
- DDA for OHCDS certification

Frequency of Verification:

- Annually for licensure
- OHCDS initial certification

Provider Category: Agency

Provider Type: Licensed Community Residential Services - Alternative Living Unit

Provider Qualifications License (specify):

License Residential Services provider as per COMAR 10.22.02 and 10.22.08

Certificate (specify):

Other Standard (specify):

Staff must possess appropriate licenses/certifications as required by law based on needs of the person at time of service.

Nurses completing the Health Risk Screening Tool (HRST) must complete all required HRST training and be certified.

Verification of Provider Qualifications

Entity Responsible for Verification:

- Office of Health Care Quality (OHCQ) for license

Frequency of Verification:

- Annually

Provider Category: Agency

Provider Type: Licensed Community Residential Services – Group Home

Provider Qualifications License (specify):

License Residential Services provider as per COMAR 10.22.02 and 10.22.08

Certificate (specify):

Other Standard (specify):

Staff must possess appropriate licenses/certifications as required by law based on needs of the person at time of service.

Nurses completing the Health Risk Screening Tool (HRST) must complete all required HRST training and be certified.

Verification of Provider Qualifications

Entity Responsible for Verification:

- Office of Health Care Quality (OHCQ) for license

Frequency of Verification:

- Annually